OVERVIEW ON WOMEN WARRIORS
AN AMERICAN HISTORY:
PAST AND PRESENT

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PRESENTATION OBJECTIVES

1. To review the history of women warriors in the American military
2. To explore the unique challenges faced by women warriors in America's military today
3. To identify changes in women warriors that make adjustment difficult upon returning from a combat zone
4. To discuss some options for helping women warriors in rural communities
History provides perspective
What is a nice girl like you doing here?
Does war effect males and females differently?
Spiritual implications
WOMEN’S ARMY AUXILIARY CORPS (WAAC)

- Established 1942
- All volunteer
- Equality
- Roles
- Symbol: Pales Athene
- Many of these Veterans are now deceased
WOMEN’S ARMY CORPS (WAC)

- Role
- Symbol: Pales Athene
- Family
- Equality
- Many of these women do not consider themselves Veterans.
NAVY: WAVES (WOMEN ACCEPTED FOR VOLUNTEER EMERGENCY SERVICES)

- Established 1942
- Philosophy
- 27K strong
- Roles
Established 1943

Negative term: BAM

Most difficult service for women
ARMY AIR CORPS/ AIR FORCE
WOMEN AIR FORCE SERVICE PILOTS (WASP)

- Established
- Philosophy
- Roles
INDUSTRIAL BASE

- Pilots moving aircraft from place to place
- Building bombs
- Mechanics
- “Line work” in factories
- Laid off / dismissed after the war
PIONEERING WOMEN WARRIORS

- Dates that changed history
- Women in combat were “invisible” at one time
- Women POWs
- Women represent peace/tender side of life
MODERN WOMEN WARRIORS

Ranger school
Sapper qualified
SPIRITUAL TOLL

- Invisible
- Alienated
- Devalued
- Dehumanized
- Sexual harassment
- Secrets
- Shame for the exact same events that men wear as badges of honor (combat).
- Rejection: “those kind of women”
- Womanhood: marriage and children
PRACTICAL MINISTRY SUGGESTIONS

- Never patronize
- Recognize valuable service
- Bring out of the shadows
- Always assume the highest award / honor / service
PTSD AND MILITARY SEXUAL TRAUMA

- Many women warriors also report experiences with military sexual trauma
- Many women warriors have direct exposure to combat operations
- Experiences with either combat or military sexual trauma (or both) can contribute to PTSD
MILITARY EXPERIENCES: FEMALE WARRIORS

- Receiving incoming rocket or mortar fire
- Knowing someone who was killed
- Being attacked or ambushed
- Seeing dead bodies
- Shooting/directing fire at an enemy
- Handling human remains
- Experiencing military sexual trauma
“EVERYTHING IS DIFFERENT NOW.”

Event

Conditions & Symptoms

Life Impact
COMMON CHANGES WITH WOMEN WARRIORS: CONDITIONS & SYMPTOMS

- Poor Health
- Trauma Symptoms
- Substance Abuse
- Eating Problems
<table>
<thead>
<tr>
<th>Disease Type</th>
<th>Female</th>
<th>Male</th>
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<tbody>
<tr>
<td>Symptoms of ill-defined conditions</td>
<td>59.5%</td>
<td>55.3%</td>
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<tr>
<td>Diseases: musculoskeletal/connective system (pain)</td>
<td>59.5%</td>
<td>60.1%</td>
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<tr>
<td>Mental disorders</td>
<td>54.8%</td>
<td>56.3%</td>
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<tr>
<td>Diseases: the nervous system/sense organs</td>
<td>48.0%</td>
<td>48.8%</td>
</tr>
<tr>
<td>Diseases: genitourinary system*</td>
<td>43.7%</td>
<td>13.5%</td>
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<tr>
<td>Diseases: the digestive system</td>
<td>39.5%</td>
<td>36.8%</td>
</tr>
<tr>
<td>Diseases: endocrine/nutritional/metabolic systems</td>
<td>36.7%</td>
<td>36.3%</td>
</tr>
<tr>
<td>Diseases: respiratory system*</td>
<td>36.3%</td>
<td>27.2%</td>
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</tbody>
</table>
WHAT CAN COMMUNITY CLERGY DO?

- Be aware of the high percentage of returning warriors with serious medical or mental health challenges and their roles in reducing quality of life.
- Be especially aware of the role of pain in limiting life roles and reducing quality of life.
- Ask warriors about their health and their healthcare and its effectiveness.
- Encourage warriors to get help for medical & mental health conditions. Provide recommendations and/or direct assistance in accessing healthcare.
SIGNS OF PROBLEMS: TRAUMA SYMPTOMS

- Irritability
- Low mood
- Sleep changes
- Feeling guilty or worthless
- Self-harming tendencies
- Sexual dysfunction
- Problems with memory & concentration
- Withdrawal from friends & family
- Distrust of others
WHAT CAN COMMUNITY CLERGY DO?

- Assist the warrior, family members, congregations and the community to better understand PTSD and differences between male and female warriors
- Educate and work with families of women warriors to understand and cope with symptoms & conditions associated with PTSD
- Know resources for treatment of PTSD and make referrals to professionals for specialty care
SIGNS OF PROBLEMS: EATING PROBLEMS

- Binge eating
- Self-esteem overly related to body image
- Eating much food followed by vomiting
- Obsession with food or thoughts of food
- Serious weight loss
- Compulsive exercise to lose weight
- Can cause medical and mental health problems like heart & kidney failure, anxiety & depression
WHAT CAN COMMUNITY CLERGY DO?

- Help families, congregations & communities understand the symptoms and long-term effects of eating problems found with some women warriors
- Watch for symptoms of eating problems; ask about eating problems women warriors might have
- Know treatment resources and make referrals for specialty care when appropriate
SIGNS OF PROBLEMS: SUBSTANCE ABUSE

- Primary problems with alcohol & prescription drugs attributed to stress reduction
- 23% of NG women display harmful drinking
  (vs. 14% of all NG soldiers in 2008-2009)
- Combat exposure is related to new-onset heavy weekly drinking & binge drinking
- Moderately-heavy drinking military women are likely to also use illegal drugs
- Women who were deployed were 3 times more likely to abuse alcohol than those not deployed
WHAT CAN COMMUNITY CLERGY DO?

- Educate yourself, your congregation and community about problems with substance use in women warriors
- Set up a “coping with anxiety” training program for women warriors in your community
- Know resources for treatment of substance use and refer women warriors for specialty treatment as appropriate
“EVERYTHING IS DIFFERENT NOW.”

Event

Conditions & Symptoms

Life Impact
SOME ROLES FOR WOMEN WARRIORS

Warrior
Friend
Partner
Worker
Person of Faith
Parent
ROLE CHALLENGES

- Diversity and complexity of roles
- Traditional vs. non-traditional roles
- Requires constant shifting of attention and balance in activity
- Can be exhausting, anxiety-provoking & stressful
- Can injure self-concept through negative self-evaluation
- Military service can add to the stress
LARGER LIFE IMPLICATIONS: FAMILY ROLES

- Combat exposure predicts poor family adjustment for women and men warriors.
- Poor family adjustment appears to be most related to changes in arousal/lack of self-control and self-persecution, a tendency to punish oneself (in contrast, primary predictors for men are feelings of detachment & blunted emotions that limit intimacy).
- Difficulties can include family conflict, aggressive behavior, ambiguity involving role expectations & inability to resolve problems.
- Women warriors have higher divorce rates than civilian women.
ROLE-RELATED PROBLEMS: PARTNERING

- Diagnosis of PTSD: associated with more numerous & severe relationship problems
- Avoidance-numbing: Impaired intimacy
- Hyperarousal: Intimate partner aggression (IPA)
  - IPA is more likely with alcohol use
  - 21.9% to 74% of women warriors are involved in intimate partner violence
  - PTSD also predicts female Veterans’ psychological abuse of partners
- PTSD appears to be strongly related to divorce
ROLE-RELATED PROBLEMS: PARENTING

Women with combat experience tend to have:

- Lower satisfaction with parenting
- Increased impulsiveness and reactivity in behavior toward children
- Poorer quality parent-child relationships with fewer shared positive experiences

With these effects on their children:

- Increased mental health problems
- Increased child behavior problems
ROLE-RELATED PROBLEMS: FRIENDSHIPS

Women and male warriors who have experienced combat may:

- Feel alienated from pre-military friendships
- Isolate away from their local community
- Feel misunderstood by family and friends
- Have characteristics that are misunderstood by civilians; civilians may avoid the warrior
ROLE-RELATED PROBLEMS: WORKER

- Women Gulf War warriors have a higher unemployment rate than peer civilians
- Women warriors are four times more likely to become homeless than civilian counterparts
- PTSD symptom severity reduces ability to work & contributes to homelessness
- Some PTSD characteristics that affect work: poor stress coping ability, irritability, social withdrawal, moodiness, negative self-concept
ROLE-RELATED PROBLEMS: PERSON OF FAITH

These are some changes that can occur after military service:
1. Confusion about/loss of relationship with God
2. Questions of theodicy
3. Loss of relationship with God
4. Loss of community
5. Altered sense of meaning or purpose in life
6. Loss of previously sustained/sustaining beliefs
7. Confusion in core ethical beliefs and morality
8. Feeling dirty, damaged or worthless
9. Feeling guilty and/or angry at self
SPIRITUAL STRUGGLES

Wrestling with God

Meaning & Purpose

Losses & Grief

Self-Concept

Others-Concept
As with male warriors, not all women warriors return with invisible wounds. But for those who do return with the invisible wounds of war, the changes can be profound. These women warriors deserve our admiration and our best efforts to bring them truly home again.
WHAT CAN COMMUNITY CLERGY DO?

- Educate the warrior, her family members, congregations & communities on the role issues faced by women warriors
- Establish group interventions for skill training for warriors & families: communication, parenting, anger management, etc.
- Start a general support group for women warriors in your community
- Know referral resources & make referrals
<table>
<thead>
<tr>
<th>Target Groups</th>
<th>Things You Can Do</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterans</td>
<td>Pastoral Care</td>
</tr>
<tr>
<td>Veteran Partners</td>
<td>Referrals</td>
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<tr>
<td>Veteran Children</td>
<td>Education</td>
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<tr>
<td>Congregations</td>
<td>Skill-based Training</td>
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<tr>
<td>Communities</td>
<td>Support Groups</td>
</tr>
<tr>
<td></td>
<td>Events Showing Appreciation/Respect</td>
</tr>
</tbody>
</table>
QUESTIONS & ANSWERS

What questions do you have for us?
REFERENCES

Our Newsletter: The Clergy Connection
http://www.ruralhealth.va.gov/ruralclergytraining/

Contact the Rural Clergy Training Project:
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